

# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

 CALIFORNIA  
 2001/02  
 FORM
 

460

Page 1 of 5

For Official Use Only

 Statement covers period  
 from July 1 2002  
 through Sept 21, 2002
 
 Date of election if applicable  
 (Month, Day, Year)
 

11-5-02

 Date Stamp  
 RECEIVED  
 03 FEB -3 AM 10:12  
 CITY CLERK  
 CITY OF LODI
 

SEE INSTRUCTIONS ON REVERSE

## 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- ☒ Officeholder, Candidate Controlled Committee  
☐ State Candidate Election Committee  
☐ Recall  
(Also Complete Part 5)  
☐ General Purpose Committee  
☐ Sponsored  
☐ Small Contributor Committee  
☐ Political Party/Central Committee
- ☐ Ballot Measure Committee  
☐ Primarily Formed  
☐ Controlled  
☐ Sponsored  
(Also Complete Part 6)  
☐ Primarily Formed Candidate/  
 Officeholder Committee  
(Also Complete Part 7)

## 2. Type of Statement:

- ☐ Preelection Statement  
☐ Semi-annual Statement  
☐ Termination Statement  
☒ Amendment (Explain below)
- ☐ Quarterly Statement  
☐ Special Odd-Year Report  
☐ Supplemental Preelection  
 Statement - Attach Form 495

incomplete schedules

## 3. Committee Information

I.D. NUMBER

961523

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Committee for Susan Hirschbach

STREET ADDRESS (NO P.O. BOX)

2443 MacArthur Parkway

CITY STATE ZIP CODE AREA CODE/PHONE

Lodi, CA 95242 (209) 334-9362

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

## Treasurer(s)

NAME OF TREASURER

Jerry Glenn

MAILING ADDRESS

2443 MacArthur Parkway

CITY STATE ZIP CODE AREA CODE/PHONE

Lodi CA 95242 (209) 334-9362

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

## 4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 1-23-03

Date

Executed on 1-23-03

Date

Executed on

Date

Executed on

Date

By Jerry Glenn

Signature of Treasurer or Assistant Treasurer

By Susan Hirschbach

Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By

Signature of Controlling Officeholder, Candidate, State Measure Proponent

By

Signature of Controlling Officeholder, Candidate, State Measure Proponent

 FPFC Form 460 (June/01)  
 FPFC Toll-Free Helpline: 866/ASK-FPFC  
 State of California

# Schedule B – Part 1 Loans Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE B - PART 1

Statement covers period from <u>July 1, 2002</u> through <u>Sept 21, 2002</u>	<b>CALIFORNIA FORM 460</b>
Page <u>2</u> of <u>5</u>	I.D. NUMBER <u>961523</u>

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Jerry Glenn 2443 MacArthur Lodi, CA 95222	Regent Town & Country Properties	\$	\$ 1,000	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$ 1,000 DATE DUE	% RATE \$	\$ 1,000 7-16-02 DATE INCURRED	CALENDAR YEAR \$ 1,000 PER ELECTION** \$
<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$ DATE DUE	% RATE \$	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$ DATE DUE	% RATE \$	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$ DATE DUE	% RATE \$	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
SUBTOTALS \$ 1,000		\$	\$	\$	\$ 1,000	\$		

## Schedule B Summary

- Loans received this period ..... \$ 1,000  
(Total Column (b) plus unitemized loans less than \$100.)
- Loans paid or forgiven this period ..... \$  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) ..... NET \$ 1,000  
Enter the net here and on the Summary Page, Column A, Line 2.  
(May be a negative number)

(Enter (e) on  
Schedule E, Line 3)

\*Amounts forgiven or paid by  
another party also must be  
reported on Schedule A.

\*\* If required.

† Contributor Codes

IND – Individual COM – Recipient Committee (other than PTY or SCC) OTH – Other PTY – Political Party SCC – Small Contributor Committee

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC

# Schedule C Nonmonetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

Statement covers period from <u>July 1, 2002</u> through <u>Sept 2, 2002</u>		CALIFORNIA FORM <b>460</b>
Page <u>3</u> of <u>5</u>		
NAME OF FILER <u>Susan Mitchell</u>		I.D. NUMBER <u>961523</u>

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
VARIOUS DATES	Jerry Glenn 2443 MacArthur Pkwy Los Angeles, CA 90022	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REALTOR Town + Country properties	Election Supplies postage Street Fair	329.95	1,329.95	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 329.95

## Schedule C Summary

- Amount received this period – nonmonetary contributions of \$100 or more.  
(Include all Schedule C subtotals.) ..... \$ 329.95
- Amount received this period – unitemized nonmonetary contributions of less than \$100 ..... \$ 65.00
- Total nonmonetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ..... TOTAL \$ 394.95

\*Contributor Codes  
IND – Individual  
COM – Recipient Committee  
(other than PTY or SCC)  
OTH – Other  
PTY – Political Party  
SCC – Small Contributor Committee

# Schedule E Payments Made

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

Statement covers period from <u>July 1, 2002</u> through <u>Sept 21, 2002</u>		CALIFORNIA FORM <b>460</b>
Page <u>4</u> of <u>5</u>		
NAME OF FILER <u>Susan Hitchcock</u>		I.D. NUMBER <u>961523</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

<b>CMP</b> campaign paraphernalia/misc.	<b>MBR</b> member communications	<b>RAD</b> radio airtime and production costs
<b>CNS</b> campaign consultants	<b>MTG</b> meetings and appearances	<b>RFD</b> returned contributions
<b>CTB</b> contribution (explain nonmonetary)*	<b>OFC</b> office expenses	<b>SAL</b> campaign workers' salaries
<b>CVC</b> civic donations	<b>PET</b> petition circulating	<b>TEL</b> t.v. or cable airtime and production costs
<b>FIL</b> candidate filing/ballot fees	<b>PHO</b> phone banks	<b>TRC</b> candidate travel, lodging, and meals
<b>FND</b> fundraising events	<b>POL</b> polling and survey research	<b>TRS</b> staff/spouse travel, lodging, and meals
<b>IND</b> independent expenditure supporting/opposing others (explain)*	<b>POS</b> postage, delivery and messenger services	<b>TSF</b> transfer between committees of the same candidate/sponsor
<b>LEG</b> legal defense	<b>PRO</b> professional services (legal, accounting)	<b>VOT</b> voter registration
<b>LIT</b> campaign literature and mailings	<b>PRT</b> print ads	<b>WEB</b> information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Duncan Press 25 W Lockeford Lodi CA 95240	LIT	BROCHURES	1,073.19

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTALS** \$ 1073.19

## Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$ <u>1073.19</u>
2. Unitemized payments made this period of under \$100	\$ <u>74.0</u>
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ <u>          </u>
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	<b>TOTAL</b> \$ <u>1147.19</u>

# Schedule F

## Accrued Expenses (Unpaid Bills)

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

Statement covers period from <u>July 1, 2002</u> through <u>Sept 21, 2002</u>	<b>CALIFORNIA FORM 460</b>
Page <u>5</u> of <u>5</u>	I.D. NUMBER <u>961523</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Susan Hitchcock

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
PRESORT CENTER 3806 COLONADO DUBLIN, CA 95240	POS	0	5962	0	5962
MASBECARD (Jerry Glenn) Gwynnias	YARD signs + billboards	0	2391.50		2391.50

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTALS \$

\$ 2451.12

\$

\$ 2451.12

### Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) ..... **INCURRED TOTALS \$** 2451.12
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) ..... **PAID TOTALS \$** \_\_\_\_\_
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET \$** 2451.12  
May be a negative number